FEC FORM 2 STATEMENT OF CANDIDACY

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SECRETARY OF THE SENATE
PUBLIC RECORDS

14 JAN 31 PM 5:30

(a) Name of Candidate (in full)					
Mary L. Landrieu					
(b) Address (number and street) 405 E. Capitol Street, SE	☐ Check	if address change	d	2. Candidate's FEC Ide	entification Number
(c) City, State, and ZIP Code				3. Is This	lew Amended
Washington		DC 200	103	Statement (N) OR X (A)
Party Affiliation	5. Office Sought		6. State & Dis	strict of Candidate	
DEMOCRATIC PARTY	Senate		LA	00	
DE	SIGNATION O	F PRINCIPA	L CAMPAIG	N COMMITTEE	
I hereby designate the following na	med political committ	ee as my Principa	l Campaign Com		election(s).
NOTE: This designation should be	filed with the appropri	iate office listed in	the instructions.	(year of ele	ction)
(a) Name of Committee (in full)					
Friends of Mary Lar	ndrieu				
(b) Address (number and street) 700 13th Street, NW					
Suite 600					
(c) City, State, and ZIP Code					
			DC.	20005	
Washington			DC	20005	
candidacy. NOTE: This designation should be	filed with the principal	campaign commi	ttee.		
(a) Name of Committee (in full)					
Big Easy Committe	е				
(b) Address (number and street) 700 13th Street, NW					
Suite 600					
(c) City, State, and ZIP Code					
Washington			DC	20005	
I certify that I have exa	mined this Statemen	t and to the best o	f my knowledge a	and belief it is true, correc	t and complete.
ignature of Capididate			$\overline{\mathcal{I}}$	Date 01/31/2014	
	XVV	ノノ			
OTE: Submission of false, erroneous	or incomplete inform	nation may subject	the person signi	ing this Statement to pena	Ities of 2 U.S.C. §437g.
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1/					FEC FORM 2 (REV 02/200

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	HER AUTHORIZED COMMITTEES oint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my p candidacy.	rincipal campaign committee, to receive and expend funds of	on behalf of my
NOTE:This designation should be filed with the principal ca	ampaign committee.	
(a) Name of Committee (in full)		
Alaska Louisiana Victory Fund		
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210		
(c) City, State and ZIP Code		
Washington	DC 20003	
	THER AUTHORIZED COMMITTEES Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my p candidacy.	principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the principal ca	ampaign committee.	
(a) Name of Committee (in full)		·
Off the Sidelines: LA NC NH		
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210		
(c) City, State and ZIP Code	· · · · · · · · · · · · · · · · · · ·	
Washington	DC 20003	
DESIGNATION OF OT		[ADDITIONAL]
	THER AUTHORIZED COMMITTEES Joint Fundraising Representatives)	[ADDITIONAL]
	oint Fundraising Representatives)	•
(Including J	coint Fundraising Representatives) principal campaign committee, to receive and expend funds	-
(Including J I hereby authorize the following named committee, which is NOT my particularly.)	coint Fundraising Representatives) principal campaign committee, to receive and expend funds	•
(Including J I hereby authorize the following named committee, which is NOT my particularly candidacy. NOTE: This designation should be filed with the principal candidacy.	coint Fundraising Representatives) principal campaign committee, to receive and expend funds	•
(Including J I hereby authorize the following named committee, which is NOT my p candidacy. NOTE:This designation should be filed with the principal ca (a) Name of Committee (in full)	coint Fundraising Representatives) principal campaign committee, to receive and expend funds	•
(Including John Pereby authorize the following named committee, which is NOT my proceedings of the candidacy. NOTE: This designation should be filed with the principal candidacy. (a) Name of Committee (in full) Landrieu Wyden Victory Fund (b) Address (number and street) 600 Pennsylvania Avenue, SE	coint Fundraising Representatives) principal campaign committee, to receive and expend funds	•

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FEC Form 2 (Rev. 02/2003)			Page 3 /
	OTHER AUTHORIZED Joint Fundraising Represen		[ADDITIONAL]
I hereby authorize the following named committee, which is NOT m candidacy.	y principal campaign committee,	to receive and expend fund	s on behalf of my
NOTE:This designation should be filed with the principal	campaign committee.		
(a) Name of Committee (in full)			
Louisiana North Carolina & Rhode	Island Victory 2014	ļ.	
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210			
(c) City, State and ZIP Code			
Washington	DC	20003	
	OTHER AUTHORIZED g Joint Fundraising Represer		[ADDITIONAL]
I hereby authorize the following named committee, which is NOT m candidacy.	ny principal campaign committee,	to receive and expend fund	s on behalf of my
NOTE: This designation should be filed with the principal	I campaign committee.		
(a) Name of Committee (in full) Women of the Senate Fund			
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210			<u></u>
(c) City, State and ZIP Code			
Washington	DC	20003	
	OTHER AUTHORIZED g Joint Fundraising Represer		[ADDITIONAL]
I hereby authorize the following named committee, which is NOT m candidacy.	ny principal campaign committee,	to receive and expend fund	s on behalf of my
NOTE:This designation should be filed with the principal	I campaign committee.		
(a) Name of Committee (in full)			
New Hampshire Louisiana Victory	Fund		
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210			
(c) City, State and ZIP Code		<u> </u>	
Washington	DC	20003	

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DESIGNATION OF OT (Including Jo	HER AUTHORIZED		[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my p candidacy.	orincipal campaign committee	e, to receive and expend fur	nds on behalf of my
NOTE:This designation should be filed with the principal ca	ampaign committee.		
(a) Name of Committee (in full)	· · · · · · · · · · · · · · · · · · ·		
New Mexico Louisiana Victory Fund			
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210			
(c) City, State and ZIP Code			
Washington	DC	20003	
DESIGNATION OF OT	THER AUTHORIZE Joint Fundraising Repres		[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my p candidacy.	principal campaign committe	e, to receive and expend fu	nds on behalf of my
NOTE: This designation should be filed with the principal ca	ampaign committee.		
(a) Name of Committee (in full)	· · · · · · · · · · · · · · · · · · ·		
Louisiana North Carolina Victory 201	14		
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210			
(c) City, State and ZIP Code		· · · · · · · · · · · · · · · · · · ·	<u> </u>
Washington	DC	20003	
DESIGNATION OF OT	THER AUTHORIZED		[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my particles.	principal campaign committe	e, to receive and expend fu	nds on behalf of my
NOTE:This designation should be filed with the principal ca	ampaign committee.		
(a) Name of Committee (in full)			
Louisiana Arkansas Victory Fund			
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210			
(c) City, State and ZIP Code			
Washington	DC	20003	

G)

FEC Form 2 (Rev. 02/2003)				Page 5 /
	OF OTHER AUTHOR			[ADDITIONAL]
I hereby authorize the following named committee, which is t candidacy.	NOT my principal campaign co	ommittee, to	receive and expend funds	on behalf of my
NOTE:This designation should be filed with the pri	incipal campaign committe	e.		
(a) Name of Committee (in full) Justice 2014				· · · · · · · · · · · · · · · · · · ·
(b) Address (number and street) 600 Pennsylvania Avenue, SE Suite 210				
(c) City, State and ZIP Code				
Washington		DC	20003	
	OF OTHER AUTHO			[ADDITIONAL]
I hereby authorize the following named committee, which is the candidacy.	NOT my principal campaign co	ommittee, to	receive and expend funds	on behalf of my
NOTE:This designation should be filed with the pri	incipal campaign committe	e.		
(a) Name of Committee (in full)				· · · · · · · · · · · · · · · · · · ·
(b) Address (number and street)	······································			
(c) City, State and ZIP Code				
	OF OTHER AUTHOR			[ADDITIONAL]
I hereby authorize the following named committee, which is N candidacy.	NOT my principal campaign co	mmittee, to I	receive and expend funds	on behalf of my
NOTE:This designation should be filed with the prin	ncipal campaign committe	₽.		
(a) Name of Committee (in full)				
(b) Address (number and street)				
(c) City, State and ZIP Code				
	<u> </u>			

JANCY ERICKSON SECRETARY

C+ C+ C+ C+ DANA K MCEALLUM SUPERINTEHDENT

HART SENATE DIFFEE BUILDING SUITE 232 WASHINGTON, DC 20510-7115 PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

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